

Contact between victim & forensic patiënt? A guideline.

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Is contact between victim and forensic patient possible?

Two forensic clinics

- TBS (as Mesdag and van der Hoeven) are clinics for mandatory treatment for people who committed crimes (partly) due to their psychiatric disorder.
- In forensic health care: pay more attention to position of the victim.
- Mesdag & Van der Hoeven developed a guideline for forensic social workers.

Develop a Guideline

- Develop a guideline for “custom-made” involvement of victims and relatives in treatment of forensic patients. In case victim and/or relative and patiënt both wish to participate.
- This guideline will be integrated in the regular proces of treatment and risk management in forensic clinics in the Netherlands

Contact broadly defined

(non)-verbal communication between victim and offender, or a representative of them.

Two-sided contact:

Victim – offender (face-to-face, phone etc)

One-sided contact:

Victim – psychologist of the offender

Victim – offender of other type of offense

Offender – education/ workshops

Forensic patients

Psychiatric and/or personality disorder:

autism, narcissistic personality disorder, high level of psychopathy

- Lack of empathy
- Limited insight in disease
- Limited insight in consequences for the victim

From **avoidance** to **opportunities** of contact

- Is contact possible when:

Offender has a **psychiatric illness**?

Offender does **not have empathy or regret** toward the victim?

The victim is **vengeful** toward the offender?

The victim is **in love** with the offender?

Depends on
the **goal** of
the contact



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The guideline

Case example

John, an offender with schizophrenia, abused a women on the street in the dark. The victim, Mary, initiates contact with John. She wants an excuse and wants to know why he abused her.

- Phase 1: what is the goal of the victim?
- Phase 2: what can the offender give?

Social worker matches
expectations

Because of the illness, John is not capable of understanding the consequences of the crime for Mary nor can he make an excuse or answer her questions. However, for Mary the contact with John was still beneficial: she now knows how the illness affected John's behavior and knows that the abuse was not her fault.

Conclusions

- Contact broadly defined (two-sided & one-sided)
- Match expectations and goals: what is possible and what is not?
- Preparations for contact may last months or years!
- Little scientific research about contact with mentally ill offenders



Future

- Implementation study in the Netherlands in forensic mental health institutions with different security levels.
- Scientific research about effects of the guideline
- Courses 'Restorative Justice' in the Master *Forensic Psychology & Victimology* at the University of Groningen



Questions & Literature

- Literature: Cook, A., Drennan, G. & Callanan, M.M. (2015). A qualitative exploration of the experience of restorative approaches in a forensic mental health setting. *The Journal of Forensic Psychiatry & Psychology*, 26, 510-531. doi: 10.1080/14789949.2015.1034753
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